

Nyal Brings Scholarship

This scholarship is established to further the education of Native American students with priority given to those of the Lakota, Dakota and Nakota heritage. There are two awards, one **undergraduate** and one **graduate**. . **Deadlines are August 1 for the Fall semester and January 15 for the Spring semester.** Requirements are listed below.

Undergraduate Scholarship Requirements

Students must be a **Sophomore, Junior or Senior** to be eligible and must have completed a minimum of 24 credit hours. Scholarships are for any approved course of study at an accredited college, university. Students must be a college level athlete in track; other sports will be considered. Recipients must major or minor in Native American studies/issues, Lakota in particular. Scholarships will be limited to funding availability. DIF does not fund summer semesters. Recipients must maintain a 2.5 GPA per semester and cumulative and demonstrate academic potential. The Foundation will determine the number of awards available.

Graduate Scholarship Requirements

Recipients of this award must show evidence of successful academic progress. Recipients must be admitted into a graduate program emphasizing Native American Studies, specifically the Lakota language or other subjects directly relevant to the preservation of Lakota culture. Scholarships are limited to funds available. This award does not include summer sessions.

APPLICATION PROCESS FOR UNDERGRADUATE AND GRADUATE AWARD

_____ Complete the application form attached. Completed applications will only be considered. The following forms are to be submitted with the application:

_____ Official transcript in a sealed envelope from the undergraduate degree granting institution

_____ Tribal enrollment

_____ Current Photo

_____ Recommendation letters from the Dean, College Advisor and a Professor who are knowledgeable of your abilities to succeed (one letter for Undergraduate award; three letters for Graduate award)

_____ Financial needs analysis completed by the school financial aid officer

The Board of Trustees of Dakota Indian Foundation will review all complete applications. Awards will be based upon recommendation letters, academic achievement, ability to complete selected program

and availability of scholarship funds. All applicants will be notified by mail and the scholarship will be sent directly to the Financial Officer at the school the student is attending.

Return all application forms to:

Dakota Indian Foundation
PO Box 340
209 N. Main Street
Chamberlain, SD 57325-0340
PHONE: 605-234-5472 FAX: 605-234-5858

NYAL BRINGS SCHOLARSHIP APPLICATION

(All information on this form is and will remain confidential)

DEADLINES: August 1 Fall Semester; January 15 Spring Semester

PERSONAL INFORMATION

Name _____ Age _____ Date of Birth _____

Home Address _____ City _____ State _____ Zip _____

Telephone Number _____ Social Security Number _____

Parent's Name _____ Telephone Number _____

Address _____ City _____ State _____ Zip _____

******SEND A COPY OF YOUR TRIBAL ENROLLMENT WITH APPLICATION******

Name of Agency _____

Address _____ City _____ State _____ Zip _____

****PLEASE ATTACH A CURRENT PHOTOGRAPH OF YOURSELF****

I authorize the Dakota Indian Foundation to use my photo in any campaign or literature.

Signature _____ Date _____

My signature confirms that I agree to take and maintain a minimum of 12 credit hours, or the check will be returned to Dakota Indian Foundation.

Signature: _____ Date _____

SCHOOL INFORMATION

Class (Please check -Sophomore- -Junior- -Senior Graduate Level
(The applicant must have at least 24 credits or above to qualify for the undergraduate Scholarship)

Applicant must have a BA/BS degree to qualify for the Graduate Scholarship.

Degree & Date _____ College/ University _____ Major _____

Educational institution you are presently attending _____

School Address: _____ City _____ State _____ Zip _____

Current field of study _____

GPA: _____ Date of graduation _____

Have you received the Dakota Indian Foundation Scholarship before?

YES _____ NO _____

PLEASE SEND OR ATTACH AN OFFICIAL COLLEGE TRANSCRIPT.
APPLICATIONS WILL NOT BE PROCESSED WITHOUT THIS INFORMATION

DAKOTA INDIAN FOUNDATION
ACADEMIC SCHOLARSHIP RECOMMENDATION

THIS FORM IS TO BE COMPLETED BY YOUR COUNSELOR, COLLEGE ADVISOR OR PROFESSOR WHO IS KNOWLEDGABLE OF YOUR ACADEMIC ABILITIES.

Name of Applicant _____

Your knowledge of this student will substantially assist the scholarship committee in considering the applicant's qualifications for receiving a scholarship.

Please list the following information:

Grade Point Average _____ Class Rank: Sophomore Junior Senior

How long have you known the student? _____

Please estimate this student's potential for academic success (use additional sheets if necessary) _____

Additional information:

Date _____ Signed _____

Title _____

School Address _____

Please return directly to:
DAKOTA INDIAN FOUNDATION SCHOLARSHIP COMMITTEE
PO BOX 340
CHAMBERLAIN SD 57325
605-234-5472 or Fax 605-234-5858

Financial Aid Needs Analysis

Dakota Indian Foundation, PO Box 340, Chamberlain, SD 57325-0340

Deadline: August 1 Fall Semester; January 15, Spring Semester

Name: _____

Address: _____
Street/PO Box # City State Zip Code

School Year: _____ Credit Hours completed: _____ Phone: _____

*****TO BE COMPLETED BY THE FINANCIAL AID ADMINISTRATOR*****

The above named student has applied for a Dakota Indian Foundation Scholarship. Verified financial need information is needed from your office before we can take action on this application. Please complete and forward this form to the above address. Your assistance is greatly appreciated. Thank you!

Budget Period From: _____ To: _____ Beginning on: _____

Resources:

| | | |
|-----------------------------|------------------|--------------------------------------|
| Parental Contribution _____ | PELL _____ | <u>Cost:</u> Tuition _____ |
| Student Contribution _____ | CWS _____ | Fees _____ |
| Spouse Contribution _____ | NDSL _____ | Books _____ |
| VA Benefits _____ | SEOG _____ | Room _____ |
| SS Benefits _____ | Stafford _____ | Board _____ |
| TANF _____ | Perkins _____ | Travel _____ |
| Loans: _____ | Voc Rehab: _____ | Misc _____ |
| Other _____ | | |

Total Resources: _____ Total Cost _____

This applicant is not eligible for PELL due to _____

Unmet Need: \$ _____

Name of Institution: _____

Address: _____

Signature Financial Aid Officer

Date

Phone